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CONFIRMATION NO. 8144

SERIAL NUMBER 10/549,617	FILING OR 371(c) DATE 09/20/2005 RULE	CLASS 128	GROUP ART UNIT 3743	ATTORNEY DOCKET NO. 0119/0047	
APPLICANTS Thomas Gostelow, Springhead, UNITED KINGDOM;					
** CONTINUING DATA ***** This application is a 371 of PCT/GB04/01707 04/21/2004 ✓ <i>ASL 6/8/06</i>					
** FOREIGN APPLICATIONS ***** UNITED KINGDOM 0309389.5 04/25/2003 ✓ <i>ASL 6/8/06</i>					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>Madhus Lely</i> <i>ASL</i> Examiner's Signature Initials		STATE OR COUNTRY UNITED KINGDOM	SHEETS DRAWING 2	TOTAL CLAIMS 10	INDEPENDENT CLAIMS 1
ADDRESS 021395					
TITLE Tracheostomy device					
FILING FEE RECEIVED 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		